

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A		7-2-01
O.I.P.E. CLASSIFIER		21	7/11/01
FORMALITY REVIEW		954	8/15/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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